

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

RECEIVED

2014 MAY -9 PM 12:06
Office Use Only

1. NAME OF COMMITTEE (in full) ☒ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5 FEC MAIL CENTER

Bull Moose PAC

ADDRESS (number and street)

P.O. Box 291627

☒ (Check if address is changed)

Los Angeles

CITY ▲

CA

STATE ▲

90029

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☒ (Check if address is changed)

quanhe@ls.edu

Optional Second E-Mail Address

quanhe@ls.edu

COMMITTEE'S WEB PAGE ADDRESS (URL)

☒ (Check if address is changed)

2. DATE

05 07 2014

3. FEC IDENTIFICATION NUMBER ►

C00562652

4. IS THIS STATEMENT

NEW (N)

OR

☒

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

H. Robert Quan

Signature of Treasurer

H. Robert Quan

Date

05 07 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
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Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

14031233713

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

Mailing Address

Title or Position

Founder

Telephone number

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U.S. POSTAGE
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90027-14
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CUSTOMER USE ONLY
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H. Robert Quan
P.O. Box 291627
Los Angeles, CA 90029
PHONE (661) 212-3670

PAYMENT BY ACCOUNT (if applicable)

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SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.
Delivery Options
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TO: (PLEASE PRINT)
Federal Election Commission
444 E Street, N.W.
Washington, D.C.
20546-3000
ZIP+4 (U.S. ADDRESSES ONLY)
20546-3000

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ORIGIN (POSTAL SERVICE USE ONLY)		DELIVERY (POSTAL SERVICE USE ONLY)	
Date Accepted (MM/DD/YY) 05/07/14	Scheduled Delivery Date (MM/DD/YY) 05/09/14	Delivery Attempt (MM/DD/YY) Time 5:58 PM	Employee Signature [Signature]
Weight 5.98 lbs.	Insurance Fee \$ 19.99	Delivery Attempt (MM/DD/YY) Time 5:58 PM	Employee Signature [Signature]
Time Accepted 5:58 PM	Return Receipt Fee \$	Delivery Attempt (MM/DD/YY) Time 5:58 PM	Employee Signature [Signature]
Date Accepted (MM/DD/YY) 05/07/14	Live Animal Transportation Fee \$	Delivery Attempt (MM/DD/YY) Time 5:58 PM	Employee Signature [Signature]
Scheduled Delivery Time 10:30 AM	Total Postage & Fees \$ 19.99	Delivery Attempt (MM/DD/YY) Time 5:58 PM	Employee Signature [Signature]
10:30 AM Delivery Fee \$		Delivery Attempt (MM/DD/YY) Time 5:58 PM	Employee Signature [Signature]
Sunday/Holiday Premium Fee \$		Delivery Attempt (MM/DD/YY) Time 5:58 PM	Employee Signature [Signature]
Acceptance Employee Initials [Initials]		Delivery Attempt (MM/DD/YY) Time 5:58 PM	Employee Signature [Signature]

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Federal Election Commission
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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
	5/9/14 DATE PREPARED

PREPARER
(8/2013)

14031233717